## MONTANA LIMITED LIABILITY COMPANY ANNUAL REPORT

Prepare, sign, submit with an original signature and filing fee.

This is the minimum information required

(This space for Secretary of State use only)

MAIL: BRAD JOHNSON

Secretary of State P.O. Box 202802

Helena Montana 59620-2802

**PHONE:** (406)444-3665 **FAX:** (406)444-3976 **WEB SITE:** sos.mt.gov



MUST BE RETURNED IN ORDER FOR YOUR LIMITED LIABILITY COMPANY TO REMAIN ACTIVE AND IN GOOD STANDING AND PREVENT INVOLUNTARY DISSOLUTION/REVOCATION PER 35-8-208, MCA

Filing Fee on or before April 15<sup>th</sup>: \$15.00 After April 15<sup>th</sup>: \$30.00

To help you determine what information is on file with this office, please call the above phone number or use our business entity search at *app.discoveringmontana.com/bes* 

	Registered Agent Information.				
The state of the s					
The name and address of the Registered Agent/Off	fice in Montana:				
Name of Registered Agent:		Phone (Optional):			
E-Mail Address (Optional):		<u></u>			
Street Address:	City:	MT Zip:			
(or Physical Location)	Cit	NATE 77'			
Mailing Address/PO Box*: *Complete if mailing address is different fron	CIIy:	both addresses must be in Montane			
Signature of New Registered Agent (require	ed if changed):				
State of Organization:					
State of Organization.					
Address of Principal Office in state of o	organization:				
r					
Limited liability company is managed b	by: $\square$ Managers or $\square$ Members. Plea	se check either box. (This information			
must agree with our records).					
Mamaa and addmagaaa (atmaat nama and t	number) of Managers or Members: (	To remove managers or members see			
opposite page).					

## INSTRUCTIONS FOR REMOVING MEMBERS OR MANAGERS

## **DOMESTIC:**

- ❖ Statement of Dissociation- The only time you need to file a Statement of Dissociation is when a member has dissociated (withdrawn) from the limited liability company. Prepare a separate Statement of Dissociation to remove each member. The Statement of Dissociation must state the name of the LLC and the name of the specific member that is being dissociated from the LLC. The Statement of Dissociation can be signed by the specific member being removed or by one of the other listed members. The filing fee is \$15.00 per Statement of Dissociation, and you must file one statement for each member being removed.
- ❖ Managed by Members- If a member is no longer managing the LLC but remains a member, a Statement of Dissociation is NOT required. Simply do not list their name as a manager.
- ❖ Managed by Managers- If a manager is no longer managing the LLC and is not a member, a Statement of Dissociation is NOT required. Simply do not list their name as a manager.

## **FOREIGN:**

- ❖ Managed by Members of Managers- Members or managers can be removed from the annual report
- 5. Professional Limited Liability Companies only. I certify that all the members and not less than one-half of the managers are qualified with the proper licensing authority in Montana or meet higher standards as specified by that licensing authority.
- 6. By my signature below, I, a member of the above limited liability company authorized to execute documents on its behalf, do state that any and all statements contained herein are true and are based upon actions taken by the LLC in accordance with the statutes or its articles of organization or operating agreement.

the status.		
Signature of member	Printed name of member signing	Date

I further state that the LLC remains in existence and has taken the necessary actions during the past year to preserve

Member address

All information provided, including names and addresses of members or managers, will be made available on the Secretary of State's web site or upon request.

Sign and include correct filing fee: \$15.00, if filed on or before April 15th \$30.00, if filed after April 15th Please send fee and completed report to: Brad Johnson (406) 444-3665 Secretary Of State P.O. Box 202802 Helena MT 59620-2802

Make checks payable to Secretary Of State, Helena MT 59620-2802